

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of  
KRISHNAMURTHI et al.



Application No.: 09/746,232

Filed: 12/21/2000

Attorney Docket No.: PA483C

Customer No.: 23696

For: SYSTEM AND METHOD FOR  
MOBILE SWITCHING CENTER  
INITIATED SERVICE NEGOTIATION

Group Art Unit: 2683

Examiner: Philip Sobutka

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Commissioner:

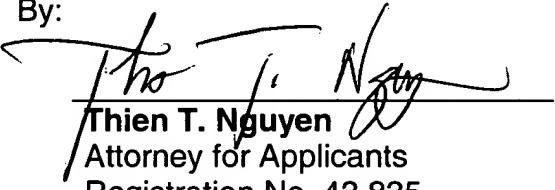
Applicants provide herewith a copy of the Amendment filed on 10/08/2002 in response to the Office Action mailed 05/08/2002.

Should any issues remain unresolved, the Examiner is encouraged to telephone the undersigned at the number provided below.

Respectfully submitted,

Dated: May 13, 2003

By:

  
Thien T. Nguyen  
Attorney for Applicants  
Registration No. 43,835

QUALCOMM Incorporated  
5775 Morehouse Drive  
San Diego, California 92121  
Telephone: (858) 651-6137  
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MAY 21 2003

OFFICE OF PETITIONS

Attorney Docket No. PA483C  
Customer No.: 23696

## AMENDMENT TRANSMITTAL FORM

Assistant Commissioner for Patents  
Washington, D.C. 20231

Customer No.: 23696  
 Attorney Docket No.: QCPA483C  
 In Re Application of: KRISHNAMURTHI  
 Serial Number: 09/746,232  
 Filed: 12/21/2000  
 Examiner: P. SOBUTKA  
 Group Art Unit: 2683

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.  
 In addition, the following documents are enclosed:

- A Petition for Extension of Time: (2) month(s) is hereby requested.
- Information Disclosure Statement (IDS):
  - PTO-1449
  - Copies of IDS Citations (number of citations: )
- Change of Attorney's Address in Application.
- Other:

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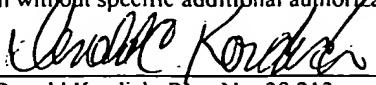
MAY 21 2003

OFFICE OF PETITIONS

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid	
Total*	12	20	0	x \$18 =	\$0.00	
Independent**	2	3	0	x \$84 =	\$0.00	
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$280	\$0.00	
EXTENSION FEES		<input type="checkbox"/> One Month		\$110	\$0.00	
		<input checked="" type="checkbox"/> Two Months		\$400	\$400.00	
		<input type="checkbox"/> Three Months		\$920	\$0.00	
INFORMATION DISCLOSURE STATEMENT		<input type="checkbox"/> After First Office Action		\$180	\$0.00	
		<input type="checkbox"/> After Final Office Action		\$130	\$0.00	
TERMINAL DISCLAIMER				\$110	\$0.00	
*If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c.			TOTAL FEE	\$400.00		

- Fee check in the amount of \$ \_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
- Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$400.00.  
 The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
- The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 10/08/2002

Signature: Donald Kordich, Reg. No. 38,213  
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